CNO N45 Brief

CDR Don Hagen, USN, MSC, CIH

N454E

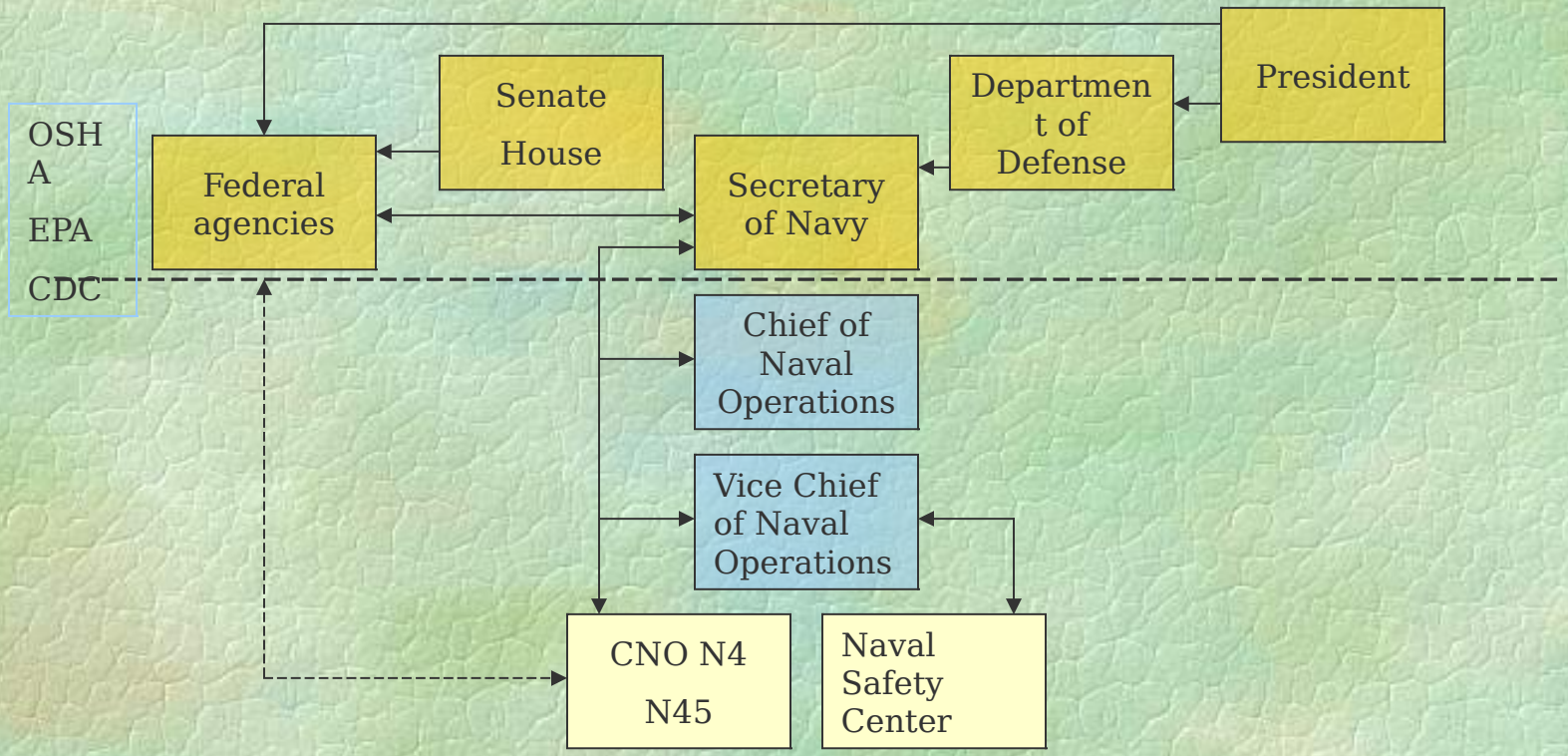
hagen.donald@hq.navy.mil

OUTLINE

- Beltway News
- Acquisition and Design
- Multi-employer Worksites
- Media Issues
- OPNAVINST
- ATFP
- Ergonomics
- Beryllium

New at N4

- VADM Moore reports this week
- RDML Stone reported Jan 02


President
Department of Defense
Senate
House
OSHA
EPA
CDC
Federal agencies
Secretary of Navy
Chief of Naval Operations
Vice Chief of Naval Operations
CNO N4
N45
Naval Safety Center
Naval Sea Systems Command
Naval Air System Command
Military Sealift Command
Bureau of Medicine and Surgery
Naval Education and Training
Fleet Commanders
Acquisition
Ship design
Maintenance
Ship
Acquisition
Systems
Maintenance
Repair
Cargo
Replenishment
Tugs
Medicine
Allied sciences
NEHC
NEPMU
Aviation
SWOS
CO / XO
NAVOSHETC
Basic training
Type Commanders
Numbered Fleets
Wings, Groups, Squadrons

DOD Influence

- SECDEF very interested in safety culture and responsibility
- National Safety Council, DOD, and Service representatives met to determine possible improvements to safety management

SECNAV Influence

- SECNAV reviews safety metrics
- Sent 3 safety messages since taking office
- DASN for Safety created

SECNAV Safety

- Deputy Assistant Secretary of the Navy (DASN) created
- Ms Connie Dewitte
  - Mr Dan Reinhard (retiring)
  - CDR Godwin
  - Mr Healing (retiring)
  - Fred Crowson

Acquisition

- Member of Environment Occupational Safety and Health Integrated Process Team
- Part of DOD 5000.2 review and rewrite process
- Part of DOD Deskbook review and rewrite process

Design and Engineering

- JSF program $10M for upgrading hearing protection
- Working on changes to ladder design
- Working on fall protection in voids and tanks
- Considering ergonomic and Human Factors early in review process
- Review 50 Operational Requirements Documents

Multi-employer

- In military-civilian-contractor workplace, whose safety standards apply?
  - Work out in contract
  - CNO contract guidance letter, 22 Jun 01
  - More work may be needed
- May have situations of military working under supervision of contractor, and vice versa.

Multi-employer

- OSHA may cite all parties for same safety discrepancy
  - No IH or OM citations to this point
- Contractor may be cited and pay fine for OSHA violation due to Navy personnel
- Contractors pay fines, Navy incurs NOV

Presentation

Top 5 OSHA Citations

1. Machine Guarding - 13 citations
2. Confined Space - 10 citations
3. Woodworking Machinery - 9 citations
4. Hazard Communication - 9 citations
5. Egress - 8 citations

CNO Occupational Health Focus

- Ergonomics
- Review Reproductive Hazards chapter OPNAVINST 5100.23 with BUMED 024
- Stay current with beryllium. Work with DOD and BUMED.

Leadership focus

- Alignment
- Data collection and analysis
- Metrics
- Falls
- Ergonomics
- Hearing

Political focus

- Cancellation of Ergonomics rule
- Beryllium exposures
- NSC report
- Industry best practice
  - Off the shelf
  - Contractor maintenance
  - Safety best practices

Media Interest

- 60 Minutes sarcoidosis
- Vieques health reports and environmental assessments
- NAS Fallon leukemia cluster
- Toledo Blade, Chicago Tribune beryllium series
  - GAO report
- Virginia Pilot asbestos series

Miscellaneous

- OPNAVINST 5100.23F signed
  - www.navosh.net
- New heat stress meter being investigated
- POM FY 04 issue submitted for additional funding for BOS safety
  - $26M delta for 100% BOS safety functions

Anti Terrorism and Force Protection (ATFP)

In reality, means Terrorism and Protection (TP)

Effect of 9-11

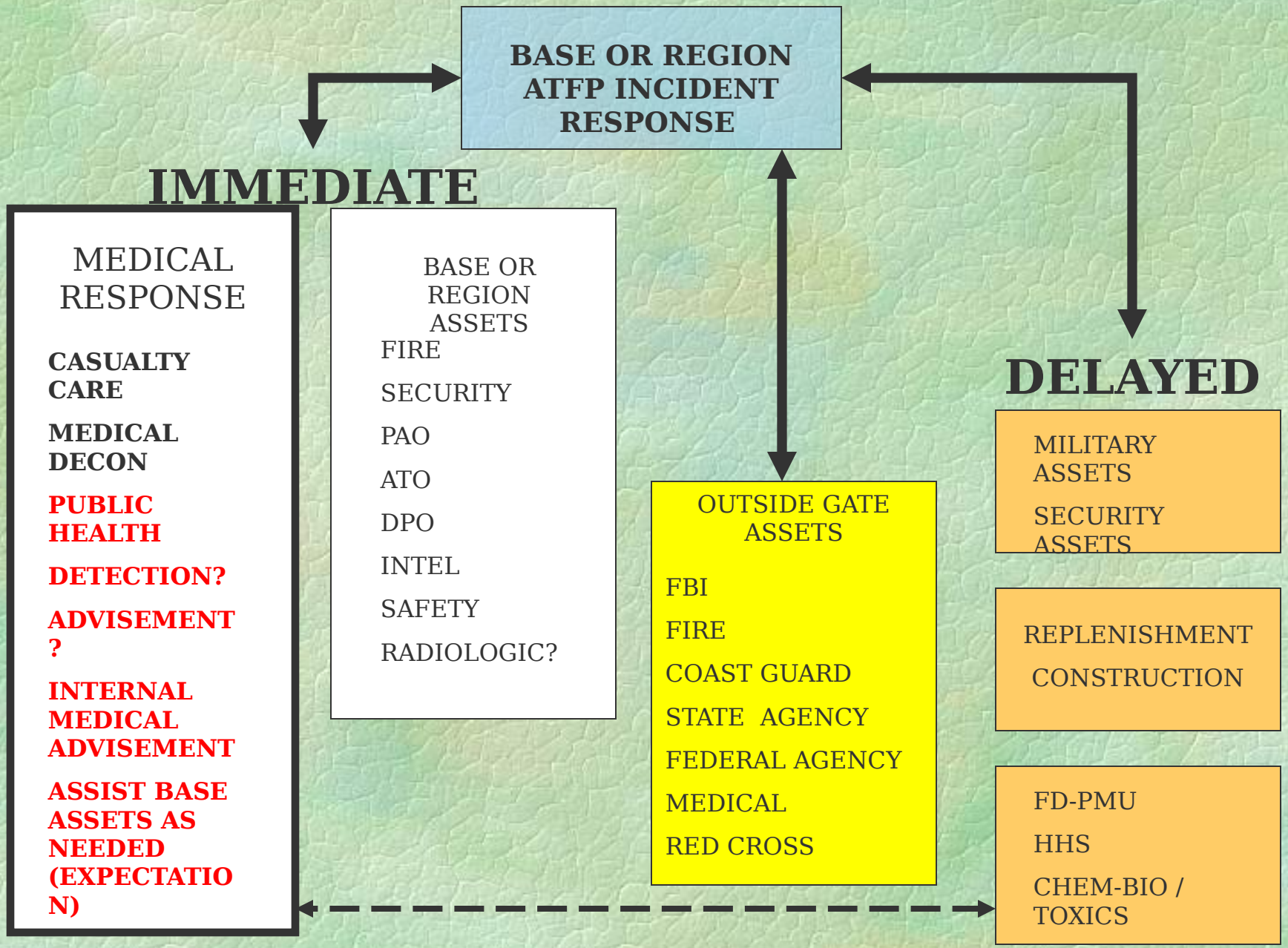
- We now think differently
- Safety and Occupational Health are components of contingency planning and response (consequence management)
- Detection
  - instrumentation, chemistry, and sampling methodology, interpretation of results
- Assessment
- PPE (IH, Safety)

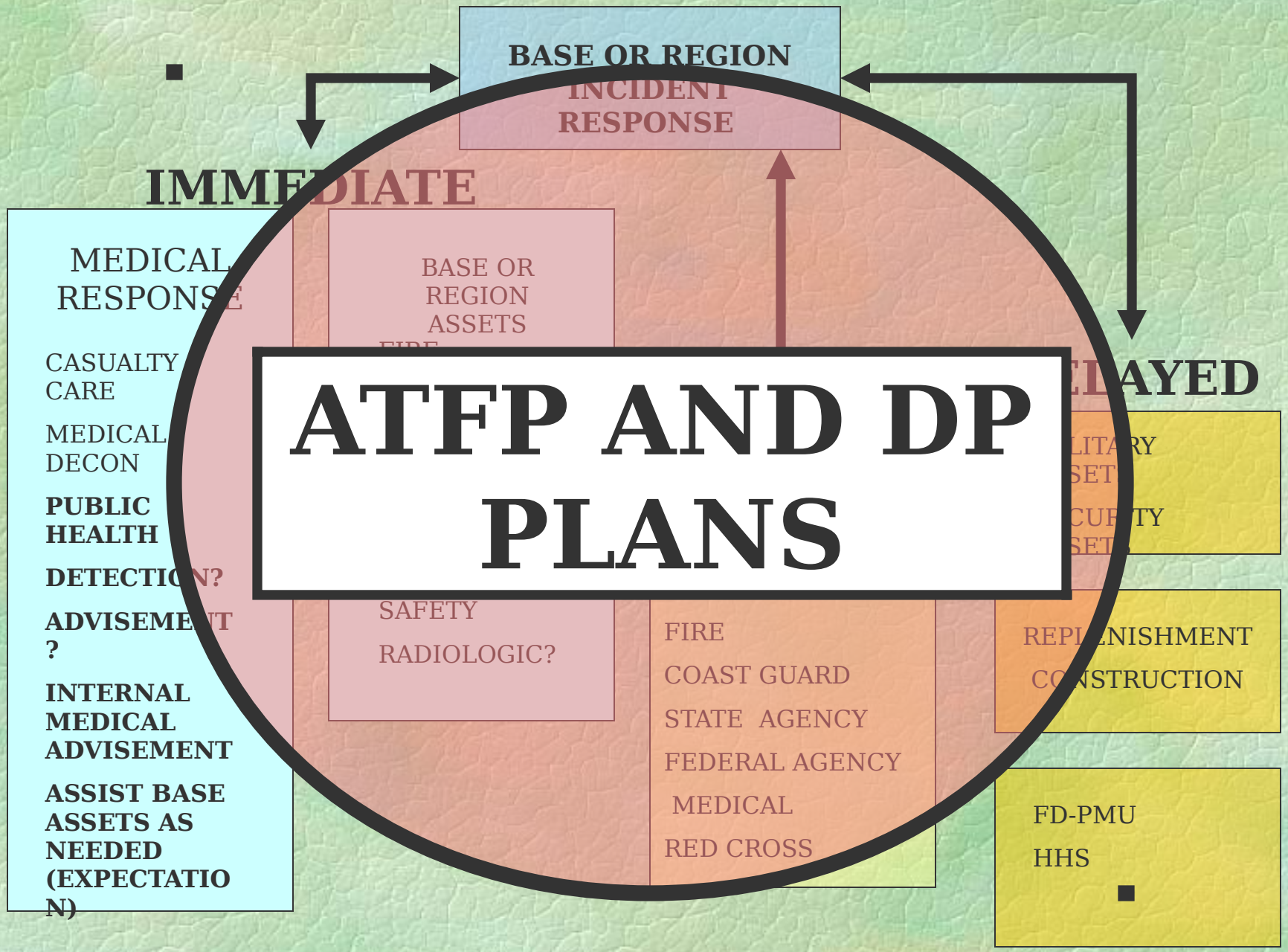
ATFP Threats

- Industrial chemical release
- WMD
- Explosive device
- Radiologic device

ATFP Delivery

- Cars, trucks, ships, airplanes
- Traditional weapons
- Creative weapons
- Any person – anywhere – anytime


BASE OR REGION ATFP INCIDENT RESPONSE
IMMEDIATE
DELAYED
MEDICAL RESPONSE
CASUALTY CARE
MEDICAL DECON
PUBLIC HEALTH
DETECTION?
ADVISEMENT ?
INTERNAL MEDICAL ADVISEMENT
ASSIST BASE ASSETS AS NEEDED (EXPECTATION)
BASE OR REGION ASSETS
FIRE
SECURITY
PAO
ATO
DPO
INTEL
SAFETY
RADIOLOGIC?
OUTSIDE GATE ASSETS
FBI
FIRE
COAST GUARD
STATE AGENCY
FEDERAL AGENCY
MEDICAL
RED CROSS
MILITARY ASSETS
SECURITY ASSETS
REPLENISHMENT
CONSTRUCTION
FD-PMU
HHS
CHEM-BIO / TOXICS

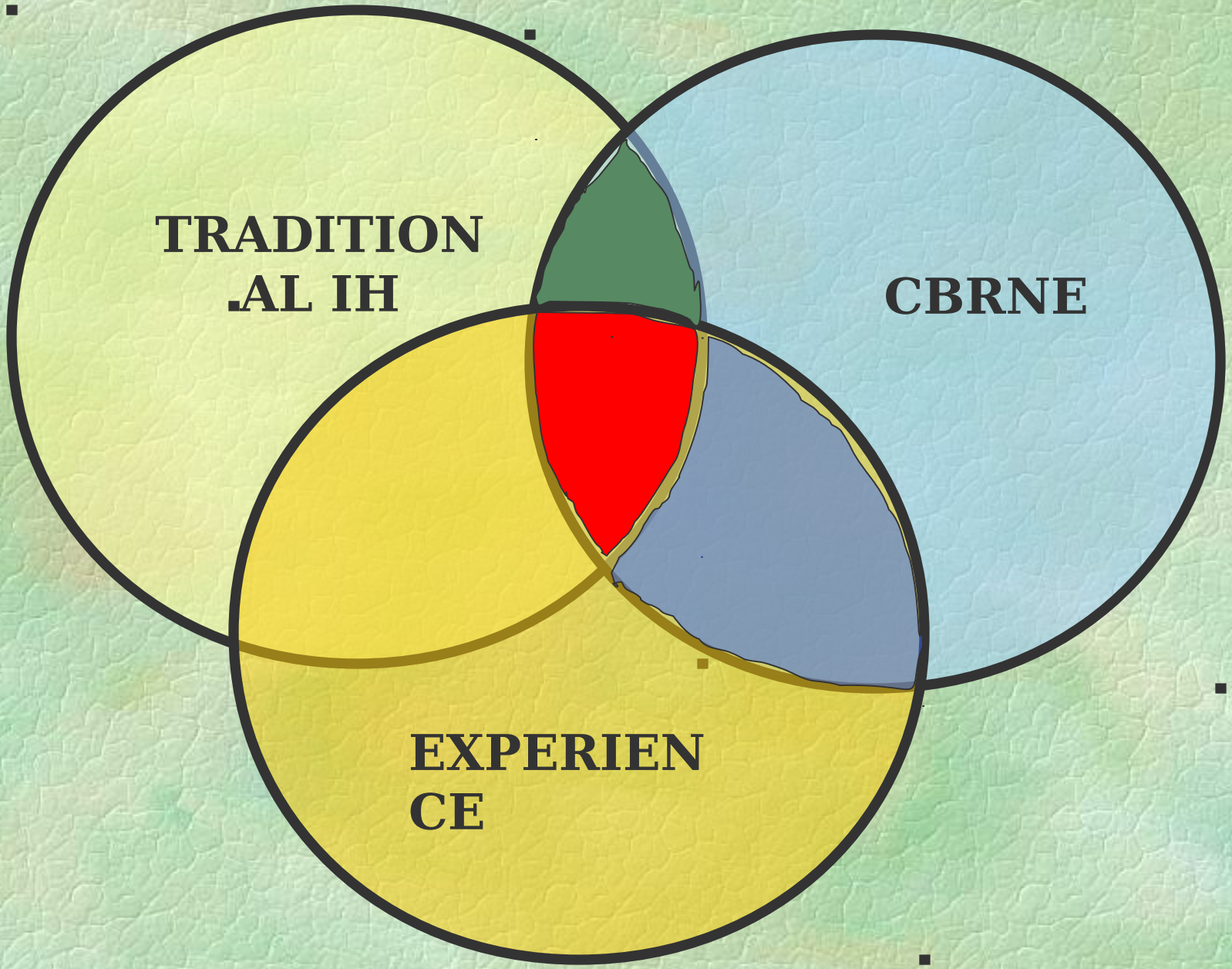

BASE OR REGION
INCIDENT
RESPONSE
IMMEDIATE
MEDICAL
RESPONSE
CASUALTY
CARE
MEDICAL
DECON
PUBLIC
HEALTH
DETECTION?
ADVISEMENT
?
INTERNAL
MEDICAL
ADVISEMENT
ASSIST BASE
ASSETS AS
NEEDED
(EXPECTATIO
N)
BASE OR
REGION
ASSETS
SAFETY
RADIOLOGIC?
FIRE
COAST GUARD
STATE AGENCY
FEDERAL AGENCY
MEDICAL
RED CROSS
ATFP AND DP
PLANS
REPLENISHMENT
CONSTRUCTION
FD-PMU
HHS

Base / Region ATFP plan

- Base and Region plans will vary
  - plans will evolve and change over time
- What is the expectation?
  - Base CO, Region
  - MTF
  - BUMED
  - ATO, DPO, IVA recommendations

MTF FOCUS

- Strictly casualty treatment and care?
- Evacuation?
- Post incident medical care
- ATFP plan team member?
  - Include applicable specialties
- CBRNE on scene actions?
- Interface with State and Federal agency assistance?


TRADITION
.AL IH
CBRNE
EXPERIEN
CE

IH TRANSFERABLE SKILLS

- Fundamental toxicology
- Fundamental chemistry
- Instrumentation
- Risk assessment
- Risk communication
- IAQ
- Ventilation
- PPE
- Sampling methodolgy
- HAZWOPER
- Fleet experience
- “out of hospital experience”

WEAKNESSES

- Microbiology
- Epidemiology
- Chem-bio
- Chem-bio detection
- Chem-bio response
- ATFP scenario industrial toxics detection and modeling
- Environmental health
- National and Navy ATFP policy
- Crime scene evidence
- IAQ
- Radiation detection and control
- Command Center skills

Ergonomics

ERGONOMIC QMB MEMBERS

- CDR Don Hagen (hagen.donald@hq.navy.mil)
- Cathy Rothwell (NAVFAC)
- Mindy Smith (NAVFAC)
- Theresa Lango-Stack (NAVFAC)
- Carla Treadwell (BUMED)
- Nancy Craft (NEHC)
- Pat Krevonik (NEHC)
- Barbara Wright (NADEP JAX)
- Freya Arroyo (USMC)

ERGONOMIC QMB

- Formally established spring 2001
- Developed NAVOSH strategic plan ergonomic objectives and goals
- Completely revised chapter 23
  - Risk Factor Screening Tool
- Developed ergonomic web site on NAVOSH.NET
- Ergonomic “toolbox” for field

ERGONOMIC QMB

- POM 04 submittal for ergonomic technical center
- Separate BUMED 04 POM issue for ergonomics
- Conducted CNA study to evaluate ergonomic related data

Beryllium

CLASSIC VIEW OF BERYLIUM DISEASE

- Granulomatous Pneumonitis
  - diffuse infiltrates
  - respiratory degradation
  - latency period
- Radiographs indistinguishable to sarcoidosis
- Dx relied on Hx of exposure

TLV HISTORY

- 1949 AEC established OEL for its facilities
- 1959 AEC limits adopted as TLV
  - 2.0 μg/m^3 8 hr TWA
  - 25 μg/m^3 STEL
- ACGIH established A2 designation and deleted STEL at later date
- Current: ACGIH proposal for 0.2 μg/m^3 8 hr TLV
- OELs based on CBD and CA

COMPENSATION

- Compensation issues difficult for diseases with long latency periods
- Recent legislation to compensate DOE workers with Be exposures

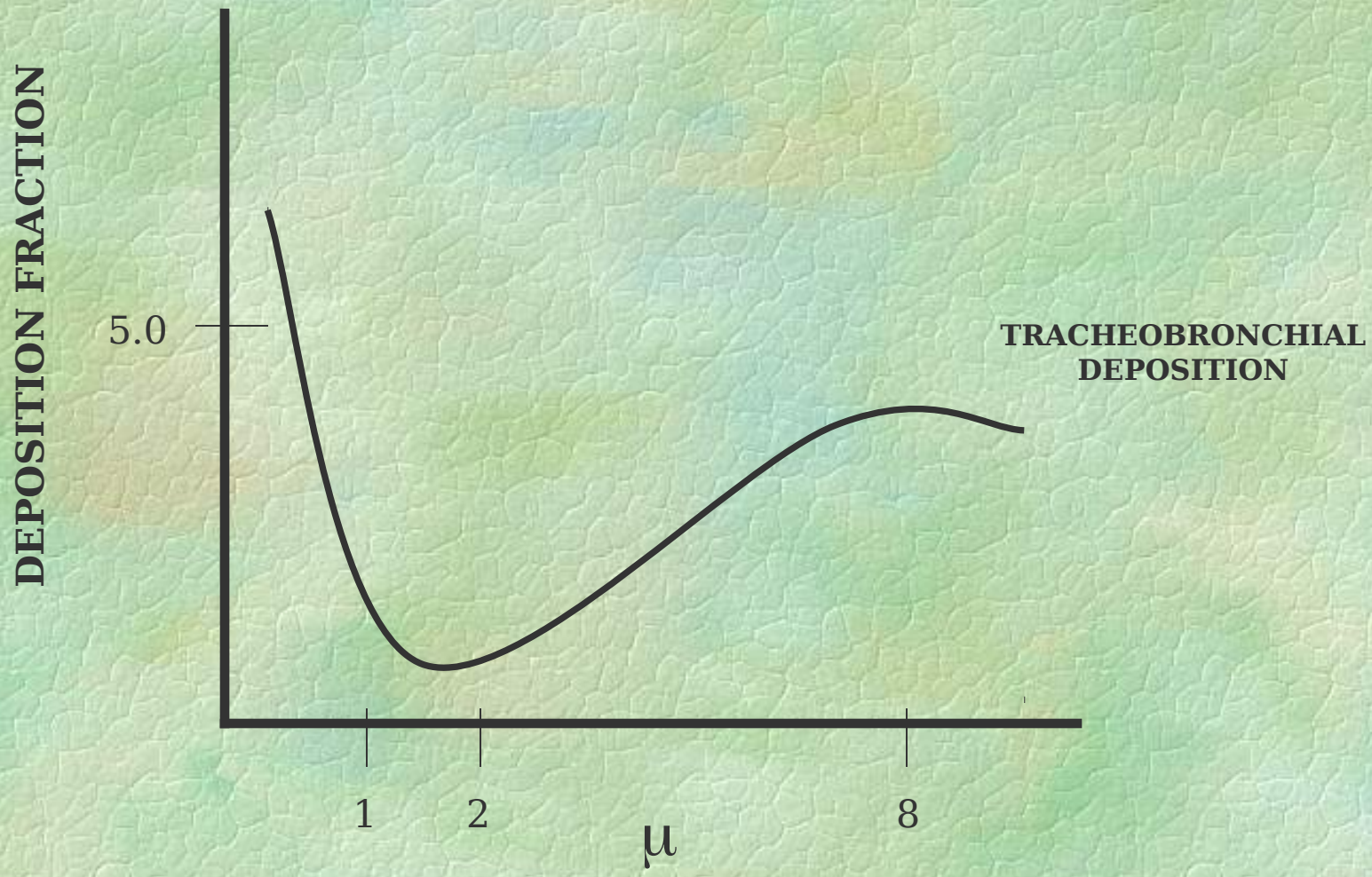
Beryllium Lymphocyte Proliferation Test (BLPT)

- Sensitized lymphocytes proliferate in presence of beryllium (antigen)
- Recent studies indicate Be exposed workers with (+) BLPT - pulmonary / blood
- Good specificity and may could be used as medical screening tool or to aid Dx

BLPT LIMITATIONS

- Standardization
- Laboratory differences
- Sensitivity
- Transitions to negative
- Presence of (+) BLPT in general population not documented
- Not a single tool for CBD Dx

Sub-micron deposition?



Be CURRENT ISSUES

- The science has not been well reported in the media
- OSHA discussion of emergency standard
- Use of (+) BLPT in defining CBD
- Is proposed TLV or emergency standard based on sensitivity?
- How would we surveil or handle workers with (+) BLPT?

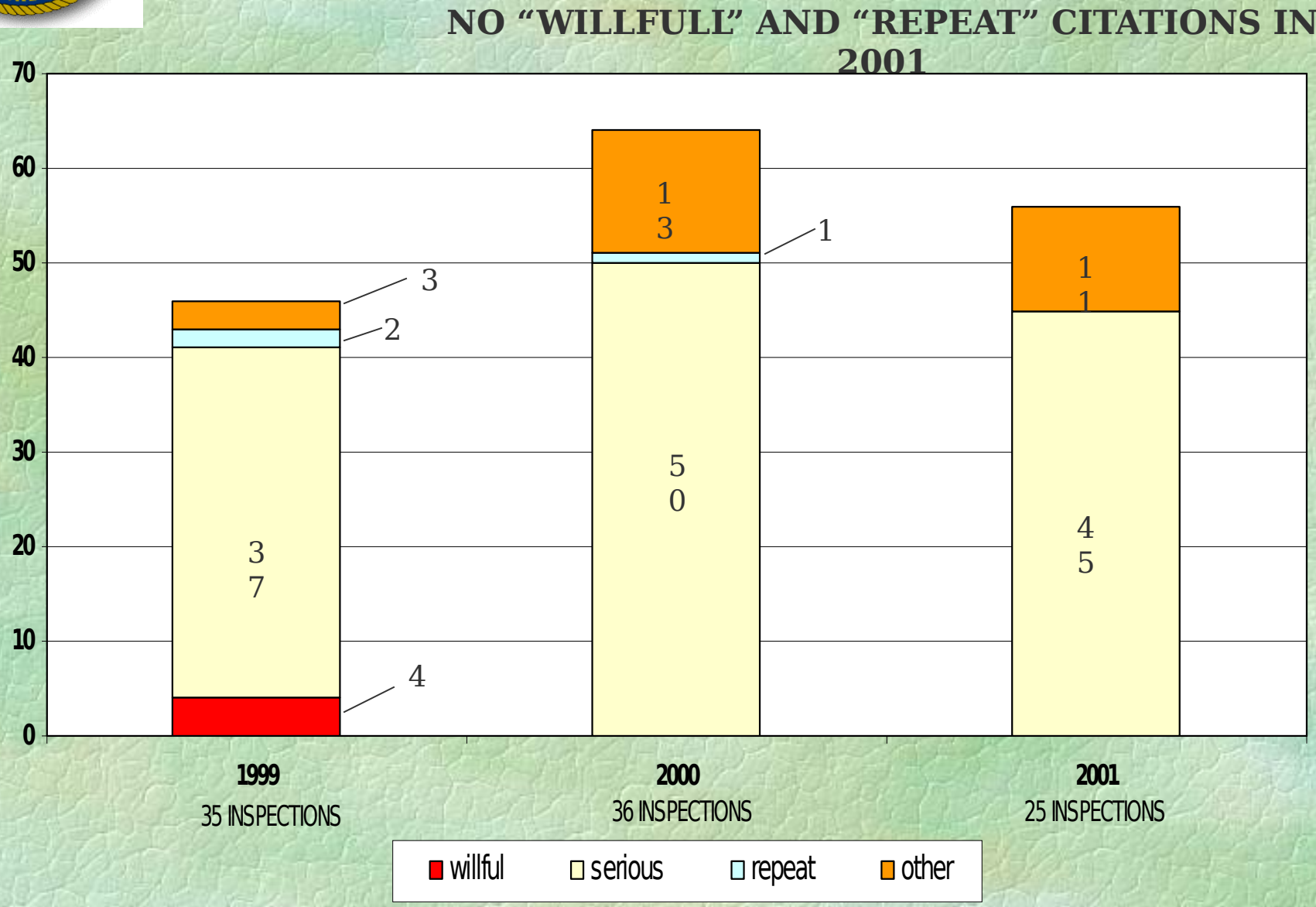
Brief Questions

OSHA Citations

- Half of citations come from employee or contractor complaint to OSHA
- Some deal with pierside ships with contractor work being conducted
- You should be familiar with portions of OPNAVINST 5100.23 and OPNAVINST 5100.19 that outline ship responsibilities when OSHA wants to investigate

backup

OSHA Citations - Type



FD PMU Model

- Geared for “Gulf War” type scenarios (Congressional Force Protection)
- Trained “experts”
- Deployable

- Does not fit Homeland Security very well
- Limited number of trained team members
- Does not offer immediate on-site response
- Does not assist in planning

FD PMU

- Has a purpose, is funded and equipped
- Should continue to be developed IAW BUMED plan

- **However, a much better concept must be developed for MTF and activity level ATFP as well as deployment scenarios without FD PMU in place**
- **Cannot rely on FD PMU the only ATFP solution**

MUST ALSO UNDERSTAND

- The community is at full capacity providing our current services
  - Cannot overburden our people
  - Are we too small a community trying to do too much?

Argument for ATFP / CBRNE core competencies and standardized training

CDR Dominique Thomas, ESC

Threat should drive ATFP requirements

Requirements will define roles

- There are CONUS and OCONUS differences

COMMUNITY BOTTOM LINE

- Specific requests for IHO
  - May exceed our capability to provide
- Increasing expectation to have IH and CBRNE advice close to a Commander faced with a threat

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- **However, as a community we do not have ATFP or CBRNE baseline skills**

NEEDED

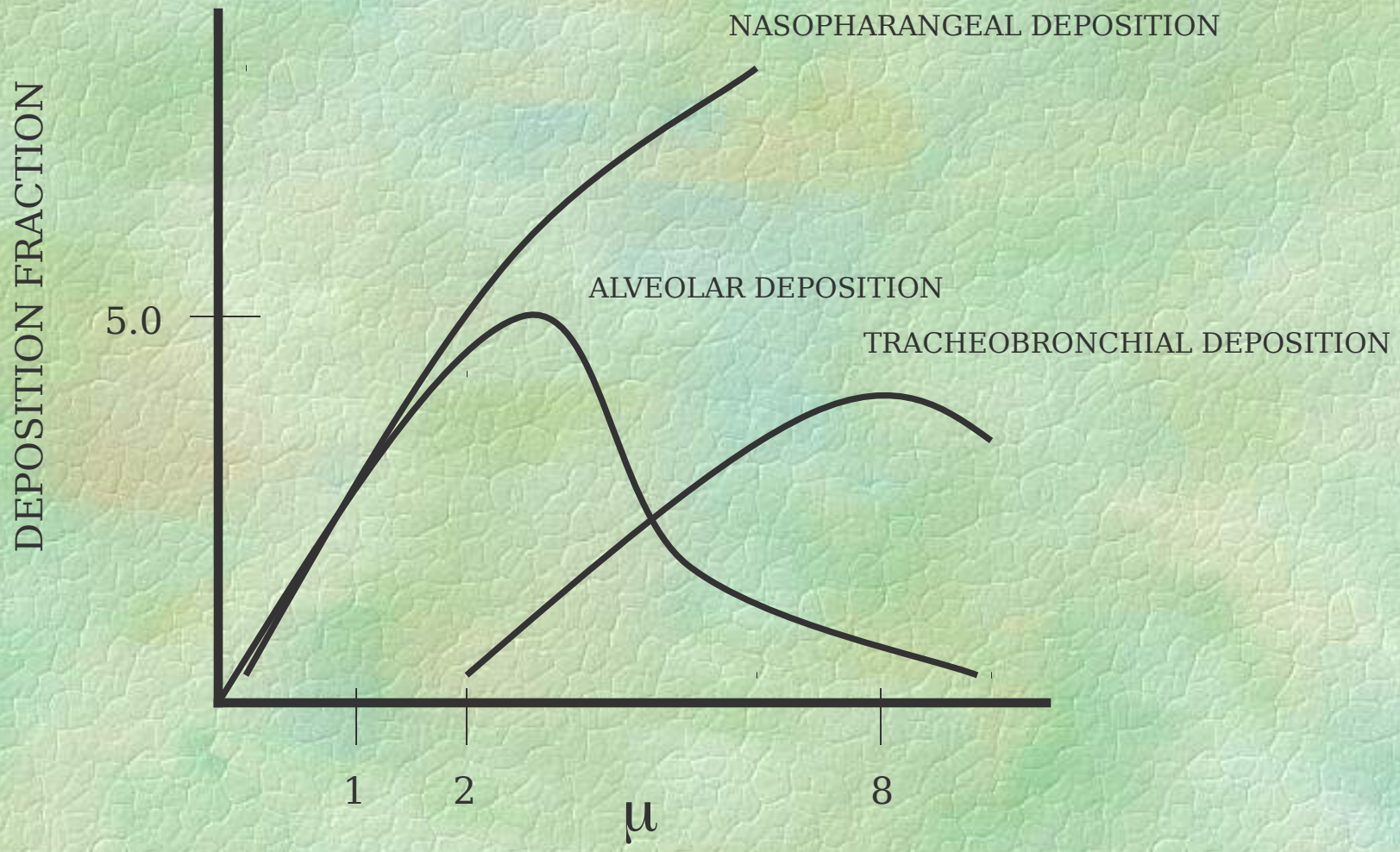
- BUMED guidance to field that IH, EH, and other specialties be engaged in Activity ATFP planning
- ATFP exercises and war-gaming include realistically exercising medical assets to include IH capabilities
- IH field guidance for outside the gate scenarios
- Discuss GS 0690 involvement

CORE COMPENTENCIES

- Use JCS, DOD, OPNAV, BUMED current guidance
- Use aspects of base and regional plans
- Standardized instrumentation, analyses, responses
- Have performance criteria

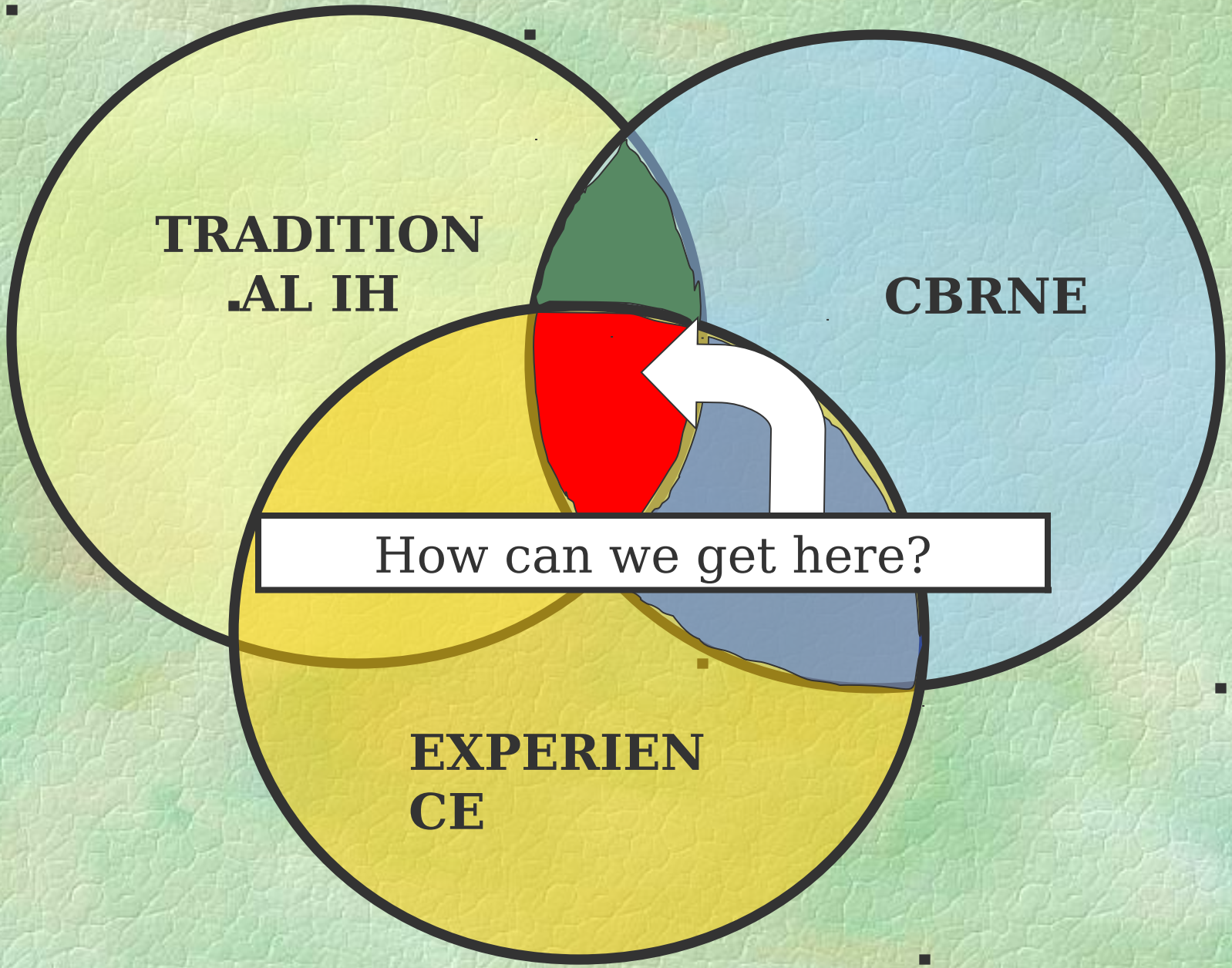
FUTURE QMB ISSUES

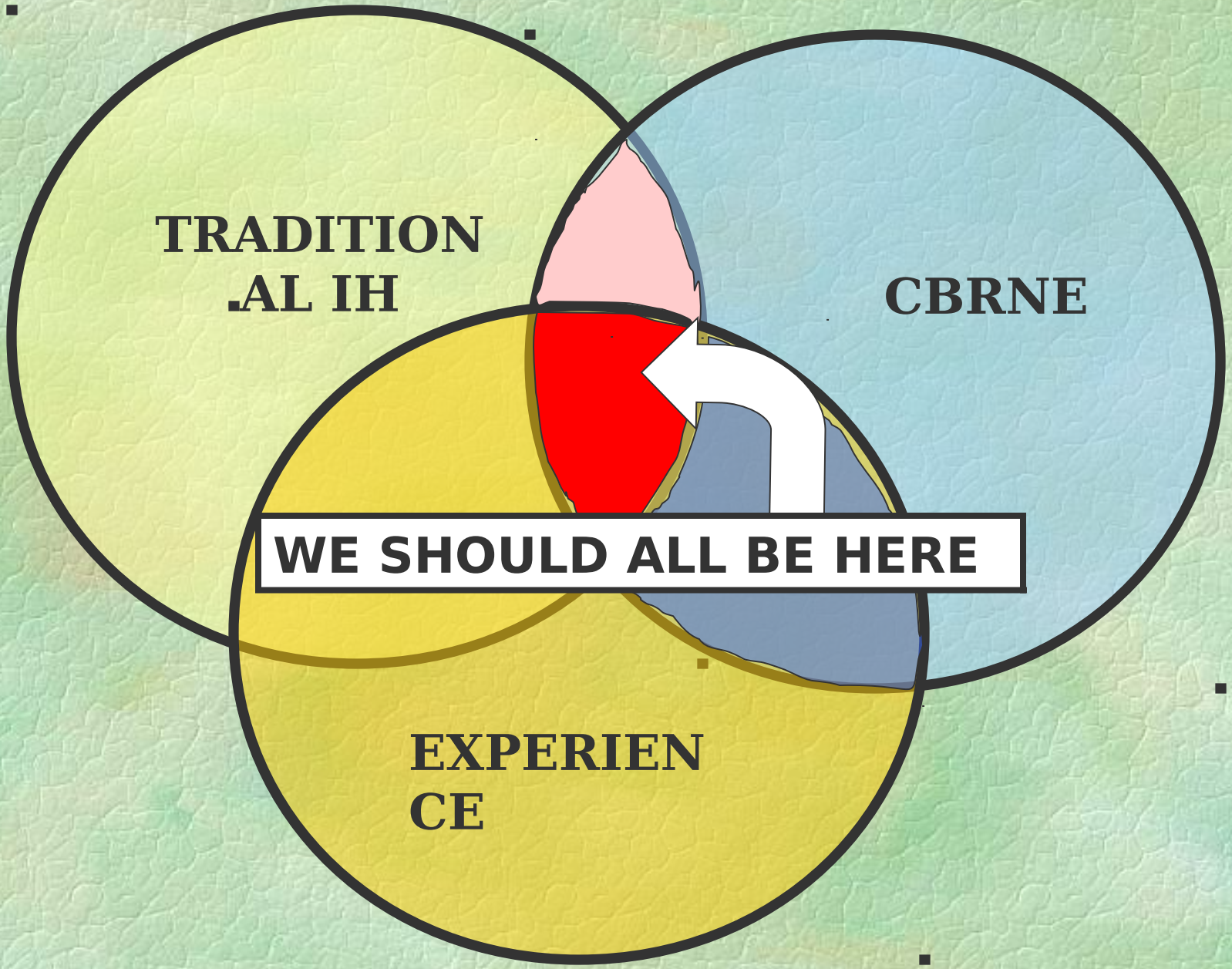
- Ergonomic training
- Ergonomic training tools
- Acquisition
- Data quality, consistency, and analysis
- Ergonomic metrics

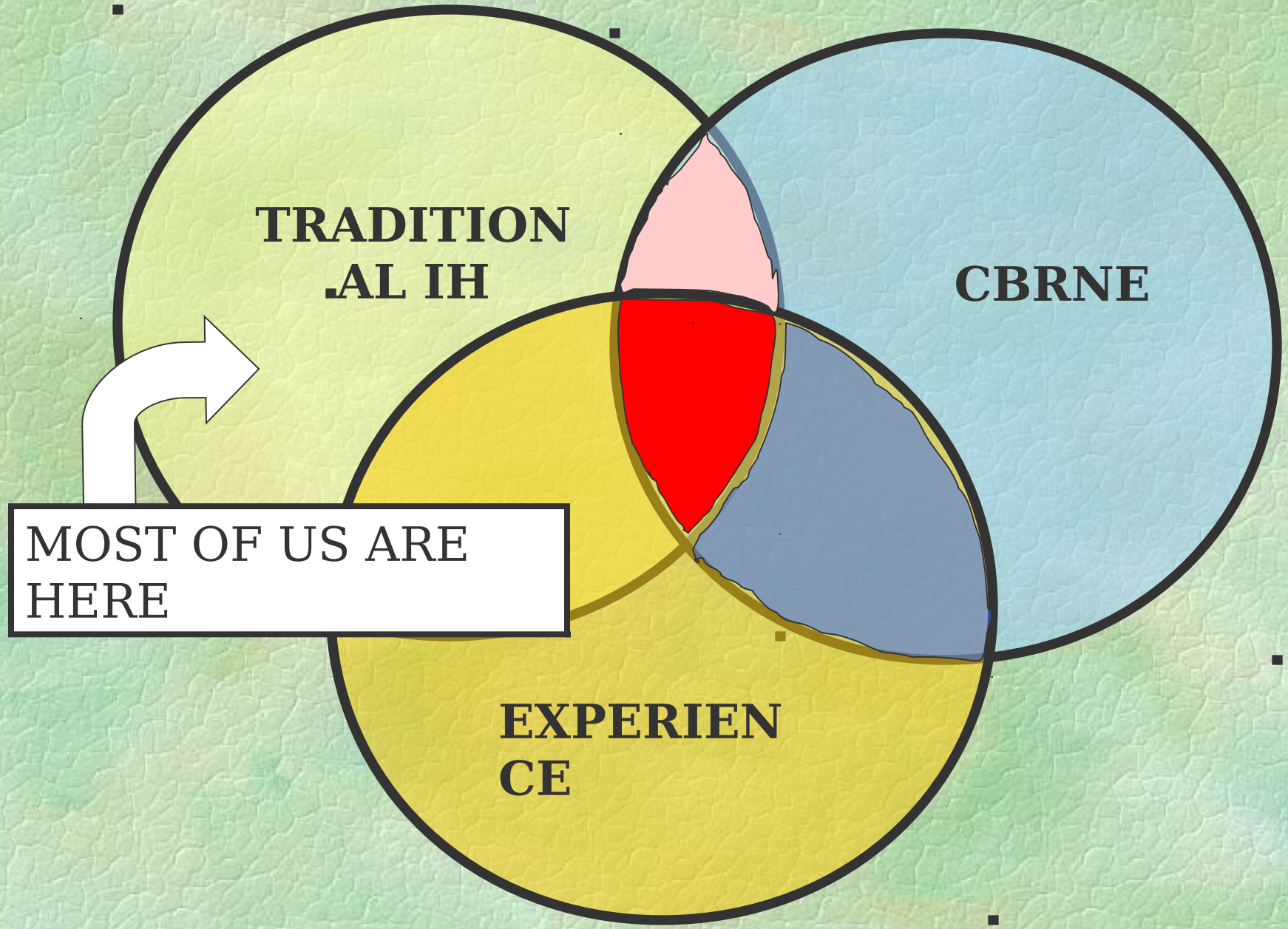

NASOPHARANGEAL DEPOSITION
ALVEOLAR DEPOSITION
TRACHEOBRONCHIAL DEPOSITION
DEPOSITION FRACTION
5.0
1
2
8
μ

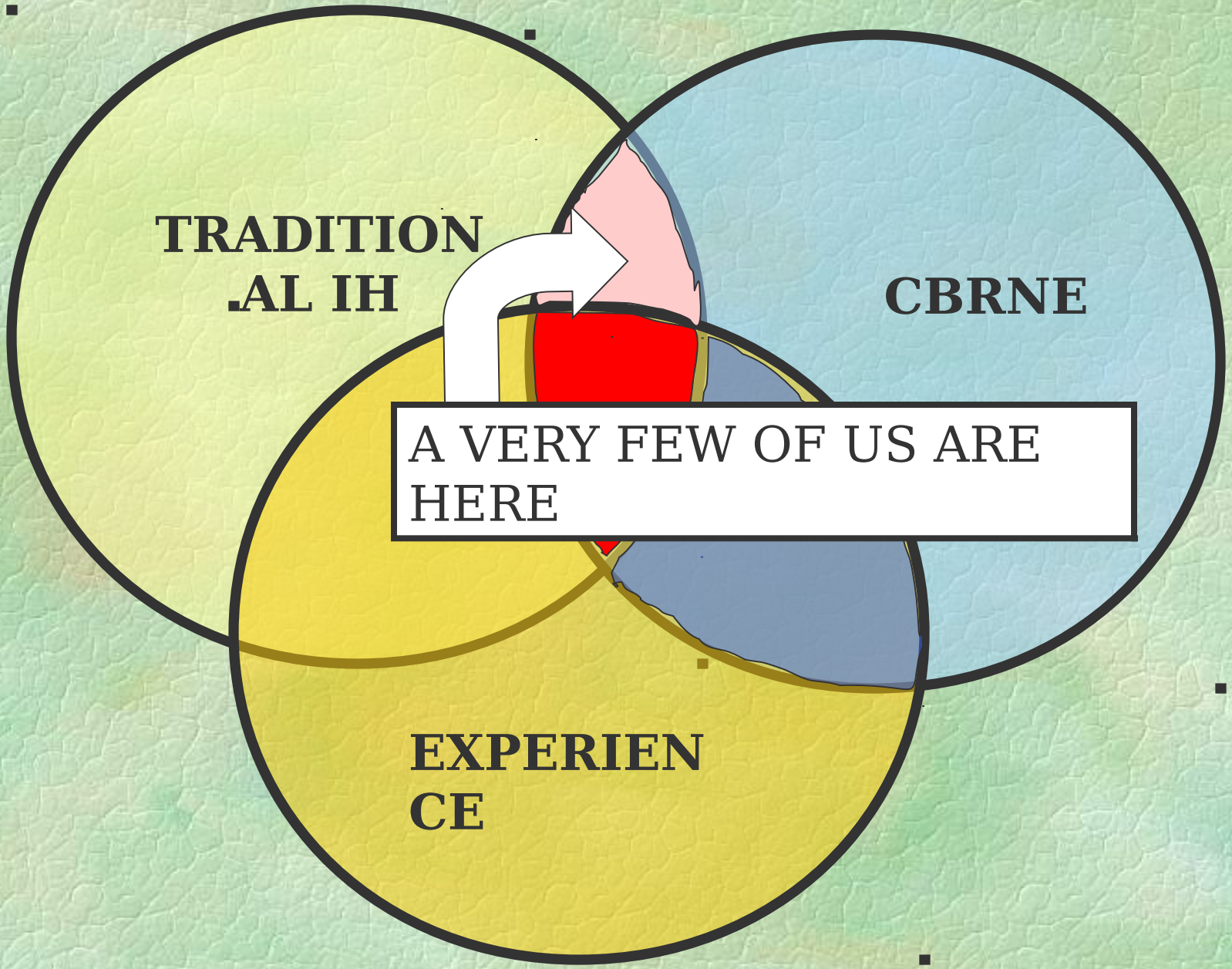
DOD/NAVY ISSUES (2 YEARS)

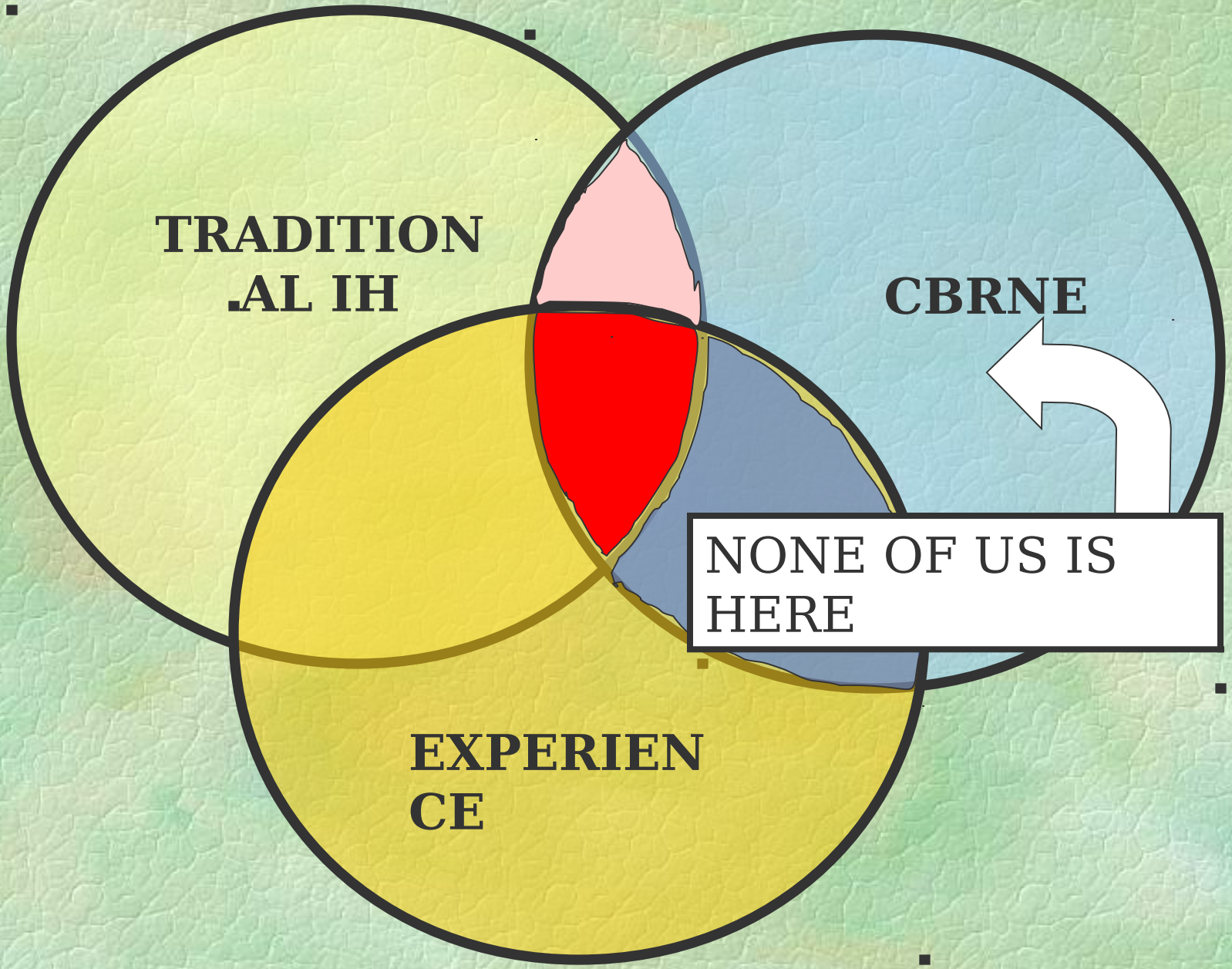
- Wait and see
- Characterize sub-micron exposures
- BLPT medical surveillance


TRADITION
.AL IH
CBRNE
How can we get here?
EXPERIEN
CE

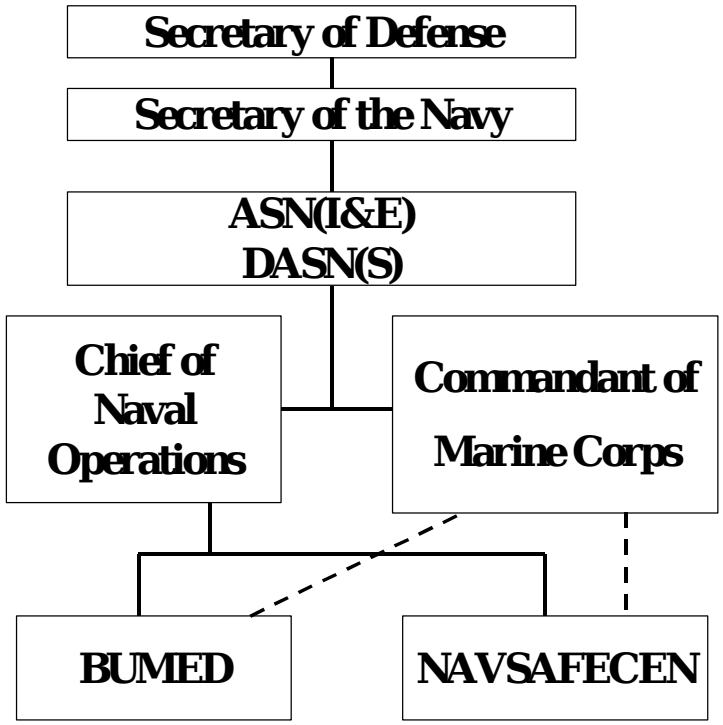

TRADITION
.AL IH
CBRNE
WE SHOULD ALL BE HERE
EXPERIEN
CE


TRADITION
.AL IH
CBRNE
EXPERIEN
CE
MOST OF US ARE
HERE


TRADITION
.AL IH
CBRNE
A VERY FEW OF US ARE HERE
EXPERIEN
CE


TRADITION
.AL IH
CBRNE
NONE OF US IS
HERE
EXPERIEN
CE

SECNAV Safety Organization



ATFP, CBRNE and Other IH Requirements Drivers

- Deployment Medical Surveillance
- Line perception and expectation
- Base ATFP plans
- Region ATFP plans
- Homeland Security
- Vision of professional organizations (AIHA)

Supportive IH

- Understand the line perception and expectation of IH services in ATFP or CBRNE
  - **Does the customer have the opportunity to define the product? Do we offer an undesired or limited product CBRNE product line?**

ATFP Plan

- Consider applicable IH skill sets that apply to Terrorism and Protection
- Consider applicable IH skill sets for recovery and clean up operations
- MTF define core competencies for junior and senior IH officers that any ATFP MOU
- Train to competency requirements
- Equip to requirements

BERYLLIUM EFFECTS

- Granulomas of other organs
- Cancer (A2)
- (+) patch test

Be FUTURE DIRECTION

- ACGIH will probably lower TLV
- House bill addressed DOE worker compensation due to Be exposures provides a quasi-legal definition of CBD using BLPT (sensitization)
- IH community may need evaluation of sub-micron Be particulate

MTF Requirements

- Health Affairs (DOD)
- DOD
- BUMED